

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
MATTHEW 25 NETWORK

ADDRESS (number and street) 25 E STREET NW SUITE 200
 Check if different than previously reported. (ACC)
WASHINGTON DC 20001

2. **FEC IDENTIFICATION NUMBER** C00449801
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 07 01 2008 through 09 30 2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer MARA VANDERSLICE

Signature of Treasurer Electronically Filed by MARA VANDERSLICE Date 10 14 2008

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only									
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FEC FORM 3X
(Rev. 12/2004)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
MATTHEW 25 NETWORK

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		0.00
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	18729.10									
(c) Total Receipts (from Line 19)	99590.56	144109.50								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	118319.66	144109.50								
7. Total Disbursements (from Line 31)	96544.91	122334.75								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	21774.75	21774.75								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	4931.64									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
MATTHEW 25 NETWORK

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	59879.00	93629.00
(i) Itemized (use Schedule A)	29687.56	35456.13
(ii) Unitemized	89566.56	129085.13
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	10000.00	15000.00
(c) Other Political Committees (such as PACs)	99566.56	144085.13
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)		
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	24.00	24.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.37
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	99590.56	144109.50
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	99590.56	144109.50

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	64675.79	76986.41
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	64675.79	76986.41
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E)	31869.12	45348.34
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	96544.91	122334.75
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	96544.91	122334.75

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3	99566.56	144085.13
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	99566.56	144085.13
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	64675.79	76986.41
37. Offsets to Operating Expenditures (from Line 15, page 3)	24.00	24.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	64651.79	76962.41

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 54
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
MATTHEW 25 NETWORK

A.	Full Name (Last, First, Middle Initial) Alan Appelbaum	Date of Receipt MM / DD / YYYY 09 / 14 / 2008
	Mailing Address 500 Croton Lake Road	Transaction ID: SA11AI.5364
	City State Zip Code Mount Kisco NY 10549	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Retired	Occupation Lawyer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

B.	Full Name (Last, First, Middle Initial) Alison Baldwin	Date of Receipt MM / DD / YYYY 09 / 21 / 2008
	Mailing Address 1415 E. 54th Place	Transaction ID: SA11AI.5411
	City State Zip Code Chicago IL 60615	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
Name of Employer National Opinion Research Center	Occupation Statistician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) Emmanuel Blackwell	Date of Receipt MM / DD / YYYY 07 / 17 / 2008
	Mailing Address 949 S St. NW	Transaction ID: SA11AI.5904
	City State Zip Code Washington DC 20007	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Raining Institute of DC	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	▶	1300.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 54

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MATTHEW 25 NETWORK

A.

Full Name (Last, First, Middle Initial)
Ananias Blocker

Mailing Address 10204 Waterwall Way

City State Zip Code
Laurel MD 20708

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
NYSE Euronext Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt MM / DD / YYYY
08 / 17 / 2008

Transaction ID: SA11AI.4718

Amount of Each Receipt this Period 1000.00

B.

Full Name (Last, First, Middle Initial)
Andy Blocker

Mailing Address 10204 Waterwell Way

City State Zip Code
Laurel MD 20708

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
New York Stock Exchange Lobbyist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 4000.00

Date of Receipt MM / DD / YYYY
09 / 19 / 2008

Transaction ID: SA11AI.6016

Amount of Each Receipt this Period 4000.00

C.

Full Name (Last, First, Middle Initial)
Clarke Camper

Mailing Address 6 Primrose Street

City State Zip Code
Chevy Chase MD 20815

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
GE Money Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt MM / DD / YYYY
09 / 07 / 2008

Transaction ID: SA11AI.5298

Amount of Each Receipt this Period 1000.00

SUBTOTAL of Receipts This Page (optional) 6000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 54

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MATTHEW 25 NETWORK

A.

Full Name (Last, First, Middle Initial)
David Carlin

Mailing Address 642 C Street, NE

City State Zip Code
Washington DC 20002

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Akin Gump Lawyer

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 14 / 2008

Transaction ID: SA11AI.5362

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)
Alice Chenault

Mailing Address PO Box 2088

City State Zip Code
Huntsville AL 35804

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
none Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 14 / 2008

Transaction ID: SA11AI.5358

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)
Eva Clayton

Mailing Address 3100 Roundtree Court #420

City State Zip Code
Raleigh NC 27604

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Eva Clayton Associates Consultant

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 17 / 2008

Transaction ID: SA11AI.5906

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1750.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 54
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MATTHEW 25 NETWORK

A.

Full Name (Last, First, Middle Initial)
Edda Coleman

Mailing Address 8425 Laiy Creek Court

City State Zip Code
Springfiled VA 22153

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Polsinelli Shahon Flanigan Legislative Director
Suehaus PC

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
08 / 10 / 2008

Transaction ID: SA11AI.4694

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
Marcus Conrad

Mailing Address 6051 Medici Court, #110

City State Zip Code
Sarasota FL 34243

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self Personal Financial Advisor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
08 / 17 / 2008

Transaction ID: SA11AI.5068

Amount of Each Receipt this Period
500.00

C.

Full Name (Last, First, Middle Initial)
William Conway

Mailing Address 10600 River Road

City State Zip Code
Potomac MD 20854

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Skadden, Arps et al. attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
09 / 28 / 2008

Transaction ID: SA11AI.5654

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► **1750.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 10 / 54
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MATTHEW 25 NETWORK

A. Full Name (Last, First, Middle Initial)
Janel Curry

Mailing Address 2511 Godwin Se

City State Zip Code
Grand Rapids MI 49507

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2008

Transaction ID: SA11AI.6053

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Michael Davis

Mailing Address 21 Ludlow Road

City State Zip Code
Westport CT 06880

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AIG Financial Products Computer Programmer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
08 / 10 / 2008

Transaction ID: SA11AI.4708

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
BJ Deering

Mailing Address 13563 22nd Avenue NE

City State Zip Code
Seattle WA 98125

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
none not employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2008

Transaction ID: SA11AI.5675

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **1000.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 54
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MATTHEW 25 NETWORK

A.	Full Name (Last, First, Middle Initial) James Duffy	Date of Receipt MM / DD / YYYY 08 / 24 / 2008
	Mailing Address 116 East 68th St	Transaction ID: SA11AI.5251
	City State Zip Code New York NY 10065	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer self Occupation writer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

B.	Full Name (Last, First, Middle Initial) Susann Edwards	Date of Receipt MM / DD / YYYY 07 / 17 / 2008
	Mailing Address 1226 Rhode Island Ave NE	Transaction ID: SA11AI.5929
	City State Zip Code Washington, DC DC 20018	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer The Rhoads Group Occupation Lobbyist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) Susann Edwards	Date of Receipt MM / DD / YYYY 07 / 20 / 2008
	Mailing Address 1226 Rhode Island Ave NE	Transaction ID: SA11AI.4621
	City State Zip Code Washington, DC DC 20018	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer The Rhoads Group Occupation Lobbyist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	750.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 54
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
MATTHEW 25 NETWORK

A.

Full Name (Last, First, Middle Initial)
Max and Kate Finberg

Mailing Address 311 Whittier St., NW

City Washington State DC Zip Code 20012

FEC ID number of contributing federal political committee. **C**

Name of Employer Alliance to End Hunger Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 07 / 2008

Transaction ID: SA11AI.5354

Amount of Each Receipt this Period
 200.00

B.

Full Name (Last, First, Middle Initial)
William Flanagan

Mailing Address 2230 California St NW Apt 6C-E

City Washington State DC Zip Code 20008

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 17 / 2008

Transaction ID: SA11AI.5884

Amount of Each Receipt this Period
 500.00

C.

Full Name (Last, First, Middle Initial)
Isaac Fordjour

Mailing Address 1212 New York Avenue NW; Suite 105

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C**

Name of Employer Tarplin, Downs and Young LLC Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 19 / 2008

Transaction ID: SA11AI.6012

Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional) ► **950.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 54
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
MATTHEW 25 NETWORK

A.

Full Name (Last, First, Middle Initial)
Wes and Karen Granberg-Michaelson

Mailing Address 5977 W Lyn Haven Dr

City State Zip Code
Kentwood MI 49512

FEC ID number of contributing federal political committee. **C**

Name of Employer Reformed Church of America Occupation Pastor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2008

Transaction ID: SA11AI.6039

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
Wesley Granberg-Michaelson

Mailing Address 5977 W. Lyn Haven Dr. SE

City State Zip Code
Kentwood MI 49512

FEC ID number of contributing federal political committee. **C**

Name of Employer Reformed Church in America Occupation Pastor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
08 / 24 / 2008

Transaction ID: SA11AI.5179

Amount of Each Receipt this Period
500.00

C.

Full Name (Last, First, Middle Initial)
Tony Hall

Mailing Address 2560 N. 23rd Rd.

City State Zip Code
Arlington VA 22207

FEC ID number of contributing federal political committee. **C**

Name of Employer Mercy Corps; Opportunity International Occupation consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
08 / 17 / 2008

Transaction ID: SA11AI.5046

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► 1000.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 54
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
MATTHEW 25 NETWORK

A.	Full Name (Last, First, Middle Initial) Rosa Lee Harden	Date of Receipt MM / DD / YYYY 09 / 28 / 2008
	Mailing Address 2601 Mission, Suite 400	Transaction ID: SA11AI.5668
	City State Zip Code San Francisco CA 94110	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Episcopal Diocese of California	Occupation rosalee@everyvoice.net	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

B.	Full Name (Last, First, Middle Initial) Steven Heyman	Date of Receipt MM / DD / YYYY 09 / 21 / 2008
	Mailing Address 1415 E. 54th Place	Transaction ID: SA11AI.5466
	City State Zip Code Chicago IL 60615	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Illinois Institute of Technology	Occupation Law professor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

C.	Full Name (Last, First, Middle Initial) Guy Hoagland	Date of Receipt MM / DD / YYYY 08 / 24 / 2008
	Mailing Address PO Box 410024	Transaction ID: SA11AI.5258
	City State Zip Code Melbourne FL 32941	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
Name of Employer self	Occupation self-employed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	▶	1600.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 54
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
MATTHEW 25 NETWORK

A.

Full Name (Last, First, Middle Initial)
Alethia Jackson

Mailing Address 523 Somerset Place, NW

City Washington State DC Zip Code 20011

FEC ID number of contributing federal political committee. **C**

Name of Employer America's Health Insurance Plans Occupation Federal Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 03 / 2008

Transaction ID: SA11AI.4668

Amount of Each Receipt this Period 500.00

B.

Full Name (Last, First, Middle Initial)
Broderick D. Johnson

Mailing Address 5901 NW Nebraska Ave

City Washington State DC Zip Code 20015

FEC ID number of contributing federal political committee. **C**

Name of Employer Bryan Cave Strategies Occupation President, Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4000.00

Date of Receipt 09 / 30 / 2008

Transaction ID: SA11AI.6027

Amount of Each Receipt this Period 1500.00

C.

Full Name (Last, First, Middle Initial)
Albert J. Kaneb

Mailing Address 2 Newton Executive Park Ste 302

City Newton State MA Zip Code 02462

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 08 / 2008

Transaction ID: SA11AI.5986

Amount of Each Receipt this Period 1000.00

SUBTOTAL of Receipts This Page (optional) ► 3000.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 54
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
MATTHEW 25 NETWORK

A.

Full Name (Last, First, Middle Initial)
David Keyes

Mailing Address 1045 Mason Street #502

City State Zip Code
San Francisco CA 94108

FEC ID number of contributing federal political committee. **C**

Name of Employer Unitarian Church Occupation minister

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 01 / 2008

Transaction ID: SA11AI.5281

Amount of Each Receipt this Period
500.00

B.

Full Name (Last, First, Middle Initial)
Frances Kieschnick

Mailing Address 1467 Hamilton Avenue

City State Zip Code
Palo Alto CA 94301

FEC ID number of contributing federal political committee. **C**

Name of Employer Trinity Parish Occupation clergy

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 27 / 2008

Transaction ID: SA11AI.4660

Amount of Each Receipt this Period
1000.00

C.

Full Name (Last, First, Middle Initial)
Phillip Kronstein

Mailing Address 4835 Cordell Ave., Apt. 1010

City State Zip Code
Bethesda MD 20814

FEC ID number of contributing federal political committee. **C**

Name of Employer FDA Occupation physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
264.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 06 / 2008

Transaction ID: SA11AI.4552

Amount of Each Receipt this Period
64.00

SUBTOTAL of Receipts This Page (optional) ► **1564.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 54
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MATTHEW 25 NETWORK

A.	Full Name (Last, First, Middle Initial) Phillip Kronstein	Date of Receipt MM / DD / YYYY 07 / 20 / 2008
	Mailing Address 4835 Cordell Ave., Apt. 1010	Transaction ID: SA11AI.4611
	City State Zip Code Bethesda MD 20814	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer FDA Occupation physician Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 304.00	

B.	Full Name (Last, First, Middle Initial) Phillip Kronstein	Date of Receipt MM / DD / YYYY 08 / 17 / 2008
	Mailing Address 4835 Cordell Ave., Apt. 1010	Transaction ID: SA11AI.4728
	City State Zip Code Bethesda MD 20814	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer FDA Occupation physician Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 354.00	

C.	Full Name (Last, First, Middle Initial) Peter and Lynne Kuhl	Date of Receipt MM / DD / YYYY 09 / 30 / 2008
	Mailing Address 2060 Wilshire Dr Se	Transaction ID: SA11AI.6055
	City State Zip Code Grand Rapids MI 49506	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	340.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 54
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MATTHEW 25 NETWORK

A.	Full Name (Last, First, Middle Initial) Timothy Lee		Date of Receipt
	Mailing Address 2511 Bennington Drive		<input type="text" value="08"/> / <input type="text" value="17"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	San Bruno	CA	94066
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer City & County of San Francisco		Occupation attorney	Transaction ID: SA11AI.5064
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="250.00"/>	<input type="text" value="250.00"/>

B.	Full Name (Last, First, Middle Initial) Del Lewis		Date of Receipt
	Mailing Address 770 Potomac River Rd		<input type="text" value="09"/> / <input type="text" value="02"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Mclean	VA	22102
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Advanced Technology Systems		Occupation CEO	Transaction ID: SA11AI.5999
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="5000.00"/>	<input type="text" value="5000.00"/>

C.	Full Name (Last, First, Middle Initial) Joan Lewis		Date of Receipt
	Mailing Address 770 Potomac River Rd		<input type="text" value="09"/> / <input type="text" value="02"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Mclean	VA	22102
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer None		Occupation Homemaker	Transaction ID: SA11AI.6001
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="5000.00"/>	<input type="text" value="5000.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="10250.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 54
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MATTHEW 25 NETWORK

A. Full Name (Last, First, Middle Initial)
Patrick Lewis

Mailing Address 6212 North Morgan St.

City State Zip Code
Alexandria VA 22312

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
MM / DD / YYYY
07 / 01 / 2008

Transaction ID: SA11AI.4390

Amount of Each Receipt this Period
5000.00

B. Full Name (Last, First, Middle Initial)
Robert Louden

Mailing Address 19325 sw 25th ct

City State Zip Code
miramar FL 33029

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Diageo Auditor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
08 / 17 / 2008

Transaction ID: SA11AI.5095

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Rebecca Lyman

Mailing Address 115 Sheridan Way

City State Zip Code
Woodside CA 94062

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
self not employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
09 / 21 / 2008

Transaction ID: SA11AI.5432

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **5750.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 54
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
MATTHEW 25 NETWORK

A.

Full Name (Last, First, Middle Initial)
Margaret Macleod

Mailing Address 424 Brookside Dr SE

City State Zip Code
Grand Rapids MI 49507

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 30 / 2008

Transaction ID: SA11AI.6026

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
Jack McDoniel

Mailing Address 3760 Market ST NE #275

City State Zip Code
Salem OR 97301

FEC ID number of contributing federal political committee. **C**

Name of Employer none Occupation not employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 21 / 2008

Transaction ID: SA11AI.5605

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
Brian McLaren

Mailing Address 8229 Rippling Branch Rd

City State Zip Code
Laurel MD 20723

FEC ID number of contributing federal political committee. **C**

Name of Employer self Occupation author

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 24 / 2008

Transaction ID: SA11AI.5177

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **700.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 54

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MATTHEW 25 NETWORK

A.

Full Name (Last, First, Middle Initial)
Fiona McMahon

Mailing Address 6212 North Morgan St.

City State Zip Code
Alexandria VA 22312

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 01 / 2008

Transaction ID: SA11AI.4394

Amount of Each Receipt this Period

5000.00

B.

Full Name (Last, First, Middle Initial)
Edward McNicholas

Mailing Address 1131 Bayliss Drive

City State Zip Code
Alexandria VA 22302

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Sidley Austin LLP Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 21 / 2008

Transaction ID: SA11AI.5569

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)
Derek Miller

Mailing Address 1630 Herbert St. NW

City State Zip Code
Washington DC 20009

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
US Senate Committee Staff

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 17 / 2008

Transaction ID: SA11AI.5898

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

5750.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 54
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MATTHEW 25 NETWORK

A. Full Name (Last, First, Middle Initial)
Matthew Newell-Ching

Mailing Address 6815 N Vancouver Ave

City Portland State OR Zip Code 97217

FEC ID number of contributing federal political committee. **C**

Name of Employer Bread for the World Occupation Regional Organizer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 03 / 2008

Transaction ID: SA11AI.4662

Amount of Each Receipt this Period 225.00

B. Full Name (Last, First, Middle Initial)
Rodney Page

Mailing Address 6318 Stoneham Lane

City McLean State VA Zip Code 22101

FEC ID number of contributing federal political committee. **C**

Name of Employer Bryan Cave LLP Occupation Lawyer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 17 / 2008

Transaction ID: SA11AI.4720

Amount of Each Receipt this Period 500.00

C. Full Name (Last, First, Middle Initial)
Donald Pratt

Mailing Address 337 Harper Pl

City Highland Park State NJ Zip Code 08904

FEC ID number of contributing federal political committee. **C**

Name of Employer Telcordia Technologies Occupation Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 27 / 2008

Transaction ID: SA11AI.4649

Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) ▶ 975.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 54
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
MATTHEW 25 NETWORK

A.

Full Name (Last, First, Middle Initial)
Walter Pryor

Mailing Address 1400 Iris St NW

City State Zip Code
Washington, DC DC 20012

FEC ID number of contributing federal political committee. **C**

Name of Employer Podesta Group Occupation Lobbyist/Lawyer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt
M M / D D / Y Y Y Y
08 / 08 / 2008

Transaction ID: SA11AI.5984

Amount of Each Receipt this Period
500.00

B.

Full Name (Last, First, Middle Initial)
Christopher Revere

Mailing Address 8101 Wingfield PI

City State Zip Code
Alexandria VA 22303

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt
M M / D D / Y Y Y Y
07 / 24 / 2008

Transaction ID: SA11AI.5953

Amount of Each Receipt this Period
1000.00

C.

Full Name (Last, First, Middle Initial)
Alfred M. Rotondaro

Mailing Address 5904 Ashby Manor

City State Zip Code
Alexandria VA 22310

FEC ID number of contributing federal political committee. **C**

Name of Employer Center for American Occupation Senior Fellow

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **5000.00**

Date of Receipt
M M / D D / Y Y Y Y
07 / 17 / 2008

Transaction ID: SA11AI.5888

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **2000.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 24 / 54
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MATTHEW 25 NETWORK

A.	Full Name (Last, First, Middle Initial) Kathleen Rotondaro		Date of Receipt
	Mailing Address 5904 Ashby Manor Rd		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 8 / 2 2 / 2 0 0 8
	City	State	Zip Code
	Alexandria	VA	22310
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer Quadel Consulting		Occupation President	Transaction ID: SA11AI.6061
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text"/> 5000.00	<input type="text"/> 5000.00

B.	Full Name (Last, First, Middle Initial) Sharon Salzberg		Date of Receipt
	Mailing Address 1230 Pleasant St		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 8 / 1 7 / 2 0 0 8
	City	State	Zip Code
	Barre	MA	01005
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer self		Occupation author	Transaction ID: SA11AI.4726
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text"/> 300.00	<input type="text"/> 100.00

C.	Full Name (Last, First, Middle Initial) Sharon Salzberg		Date of Receipt
	Mailing Address 1230 Pleasant St		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 9 / 0 7 / 2 0 0 8
	City	State	Zip Code
	Barre	MA	01005
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer self		Occupation author	Transaction ID: SA11AI.5348
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text"/> 400.00	<input type="text"/> 100.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 5200.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 54
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
MATTHEW 25 NETWORK

A.

Full Name (Last, First, Middle Initial)
Enemus Samuels

Mailing Address 14426 Fairdale Rd

City State Zip Code
Silver Spring MD 20905

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Self Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
08 / 17 / 2008

Transaction ID: SA11AI.4731

Amount of Each Receipt this Period
1000.00

B.

Full Name (Last, First, Middle Initial)
Janine Smith

Mailing Address 310 Opera Ct

City State Zip Code
Silver Spring MD 20901

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Lawyer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
09 / 14 / 2008

Transaction ID: SA11AI.5370

Amount of Each Receipt this Period
500.00

C.

Full Name (Last, First, Middle Initial)
Greta Snider

Mailing Address 54 Bonview Street

City State Zip Code
San Francisco CA 94110

FEC ID number of contributing federal political committee. **C**

Name of Employer teacher Occupation SFSU

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
09 / 14 / 2008

Transaction ID: SA11AI.5399

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **1750.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 54
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MATTHEW 25 NETWORK

A. Full Name (Last, First, Middle Initial)
Ron Michael Stief

Mailing Address 1807 10th St Apt 6

City State Zip Code
Santa Monica CA 90404

FEC ID number of contributing federal political committee. **C**

Name of Employer: Faith in Public Life Occupation: Program Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 07 / 17 / 2008
Transaction ID: SA11AI.5926
Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
Daniella Landau Strother

Mailing Address 3036 New Mexico Ave NW

City State Zip Code
Washington DC 20016

FEC ID number of contributing federal political committee. **C**

Name of Employer: Occupation:

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 07 / 21 / 2008
Transaction ID: SA11AI.5937
Amount of Each Receipt this Period: 1000.00

C. Full Name (Last, First, Middle Initial)
Dan Tate

Mailing Address 4510 Wethwill Rd

City State Zip Code
Bethesda MD 20816

FEC ID number of contributing federal political committee. **C**

Name of Employer: Capital Solutions Occupation: Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 07 / 20 / 2008
Transaction ID: SA11AI.4625
Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ► 2250.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 / 54
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MATTHEW 25 NETWORK

A.	Full Name (Last, First, Middle Initial) Ronald Tompkins	Date of Receipt MM / DD / YYYY 08 / 24 / 2008
	Mailing Address 81-05 35th Avenue #2K	Transaction ID: SA11AI.5232
	City State Zip Code Jackson Heights NY 11372	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Community Churh Occupation Clergy Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

B.	Full Name (Last, First, Middle Initial) Ronald Tompkins	Date of Receipt MM / DD / YYYY 09 / 21 / 2008
	Mailing Address 81-05 35th Avenue #2K	Transaction ID: SA11AI.5596
	City State Zip Code Jackson Heights NY 11372	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Community Churh Occupation Clergy Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00	

C.	Full Name (Last, First, Middle Initial) Karen and Bob VanStright	Date of Receipt MM / DD / YYYY 09 / 30 / 2008
	Mailing Address 5765 Arroyo Vista Dr NE	Transaction ID: SA11AI.6035
	City State Zip Code Rockford MI 49341	Amount of Each Receipt this Period 2500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Self-employed Occupation Educator/Business Owner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2500.00	

SUBTOTAL of Receipts This Page (optional)	3000.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 / 54
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MATTHEW 25 NETWORK

A.	Full Name (Last, First, Middle Initial) Thomas Ward		Date of Receipt
	Mailing Address 218 Chestnut Ave.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 07 / 13 / 2008
	City	State	Zip Code
	Jamaica Plain	MA	02130
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4608
Name of Employer Auctive, Inc.		Occupation President, Beverage & Food Consulting	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 750.00	250.00

B.	Full Name (Last, First, Middle Initial) Thomas Ward		Date of Receipt
	Mailing Address 218 Chestnut Ave.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 07 / 2008
	City	State	Zip Code
	Jamaica Plain	MA	02130
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.5326
Name of Employer Auctive, Inc.		Occupation President, Beverage & Food Consulting	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1250.00	500.00

C.	Full Name (Last, First, Middle Initial) James Wickett		Date of Receipt
	Mailing Address 142 Patricia Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 07 / 20 / 2008
	City	State	Zip Code
	Atherton	CA	94027
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4610
Name of Employer Macrovision Corporation		Occupation Businessman: EVP Corp. Dev.	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	500.00

SUBTOTAL of Receipts This Page (optional)	▶	1250.00
TOTAL This Period (last page this line number only)	▶	59879.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 54
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MATTHEW 25 NETWORK

A. Full Name (Last, First, Middle Initial)
BUILDING RELATIONSHIPS IN DIVERSE GEOGRAPHIC ENVIRONMENTS PAC (BRIDGE PAC)
 Mailing Address 499 SOUTH CAPITOL ST SW SUITE 412
 City State Zip Code
 WASHINGTON DC 20003
 Date of Receipt
 M M / D D / Y Y Y Y Y
 07 24 / 2008
Transaction ID: SA11C.4541
 Amount of Each Receipt this Period
 5000.00
 FEC ID number of contributing federal political committee. **C** C00399196
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

B. Full Name (Last, First, Middle Initial)
FRIENDS OF ROSA DELAURO
 Mailing Address 12 TRUMBULL STREET
 City State Zip Code
 NEW HAVEN CT 06511
 Date of Receipt
 M M / D D / Y Y Y Y Y
 08 14 / 2008
Transaction ID: SA11C.4538
 Amount of Each Receipt this Period
 5000.00
 FEC ID number of contributing federal political committee. **C** C00238865
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

SUBTOTAL of Receipts This Page (optional) ► 10000.00
TOTAL This Period (last page this line number only) ► 10000.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 30 / 54

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MATTHEW 25 NETWORK

A.	Full Name (Last, First, Middle Initial) Advance Audio Visual	Transaction ID: SB21B.5722 Date of Disbursement
	Mailing Address 10739 Tucker Street	<input type="text" value="07"/> / <input type="text" value="16"/> / <input type="text" value="2008"/>
	City Beltsville State MD Zip Code 20805	Amount of Each Disbursement this Period
	Purpose of Disbursement Audio Visual for Event Candidate Name	<input type="text" value="407.36"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Amtrak	Transaction ID: SB21B.5783 Date of Disbursement
	Mailing Address 60 Massachusetts Ave, NE	<input type="text" value="08"/> / <input type="text" value="20"/> / <input type="text" value="2008"/>
	City Washington State DC Zip Code 20002	Amount of Each Disbursement this Period
	Purpose of Disbursement Travel Candidate Name	<input type="text" value="76.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Amtrak	Transaction ID: SB21B.5796 Date of Disbursement
	Mailing Address 60 Massachusetts Ave, NE	<input type="text" value="08"/> / <input type="text" value="25"/> / <input type="text" value="2008"/>
	City Washington State DC Zip Code 20002	Amount of Each Disbursement this Period
	Purpose of Disbursement Travel Candidate Name	<input type="text" value="45.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="528.36"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MATTHEW 25 NETWORK

<p>A. Full Name (Last, First, Middle Initial) Amtrak</p> <p>Mailing Address 60 Massachusetts Ave, NE</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.5835</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="76.00"/></p>
<p>B. Full Name (Last, First, Middle Initial) AP/World Wide Photos</p> <p>Mailing Address 450 West 33rd Street</p> <p>City New York State NY Zip Code 10001</p> <p>Purpose of Disbursement Photos</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.5728</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="1"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="375.00"/></p>
<p>C. Full Name (Last, First, Middle Initial) Apple Store</p> <p>Mailing Address 1100 South Hayes Street</p> <p>City Arlington State VA Zip Code 22202</p> <p>Purpose of Disbursement Computer</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.5739</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2254.35"/></p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="2705.35"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MATTHEW 25 NETWORK

A.	Full Name (Last, First, Middle Initial) Auburn Quad, Inc.	Transaction ID: SB21B.5862 Date of Disbursement 09 / 30 / 2008
	Mailing Address PO Box 390728	Amount of Each Disbursement this Period 1661.47
	City Cambridge State MA Zip Code 02139	
	Purpose of Disbursement Credit Card Processing Charges	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Dewey Digital	Transaction ID: SB21B.5815 Date of Disbursement 09 / 01 / 2008
	Mailing Address 1001 G Street, NW	Amount of Each Disbursement this Period 5000.00
	City Washington State DC Zip Code 20001	
	Purpose of Disbursement Website	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Dewey Digital	Transaction ID: SB21B.5837 Date of Disbursement 09 / 12 / 2008
	Mailing Address 1001 G Street, NW	Amount of Each Disbursement this Period 1050.00
	City Washington State DC Zip Code 20001	
	Purpose of Disbursement Website	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	7711.47
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE 33 / 54

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MATTHEW 25 NETWORK

A.	Full Name (Last, First, Middle Initial) Dewey Digital	Transaction ID: SB21B.5838
	Mailing Address 1001 G Street, NW	Date of Disbursement 09 / 15 / 2008
	City Washington State DC Zip Code 20001	Amount of Each Disbursement this Period 1050.00
	Purpose of Disbursement Website Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) FedexKinko's	Transaction ID: SB21B.5858
	Mailing Address 5225 Wisconsin Avenue	Date of Disbursement 09 / 30 / 2008
	City Washington State DC Zip Code 20015	Amount of Each Disbursement this Period 39.28
	Purpose of Disbursement Copying Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Fresh Start Catering	Transaction ID: SB21B.5736
	Mailing Address 425 Second Street, NW	Date of Disbursement 07 / 21 / 2008
	City Washington State DC Zip Code 20008	Amount of Each Disbursement this Period 1212.21
	Purpose of Disbursement Catering Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	2301.49
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MATTHEW 25 NETWORK

A.	Full Name (Last, First, Middle Initial) Google Adwords Mailing Address 1600 Ampitheater Pkwy City Mountain View State CA Zip Code 94043 Purpose of Disbursement Web Advertising Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.5778 Date of Disbursement 08 / 18 / 2008	Amount of Each Disbursement this Period 224.23
B.	Full Name (Last, First, Middle Initial) Google Adwords Mailing Address 1600 Ampitheater Pkwy City Mountain View State CA Zip Code 94043 Purpose of Disbursement Web Advertising Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.5819 Date of Disbursement 09 / 02 / 2008	Amount of Each Disbursement this Period 363.39
C.	Full Name (Last, First, Middle Initial) Google Adwords Mailing Address 1600 Ampitheater Pkwy City Mountain View State CA Zip Code 94043 Purpose of Disbursement Web Advertising Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.5851 Date of Disbursement 09 / 25 / 2008	Amount of Each Disbursement this Period 514.37

SUBTOTAL of Disbursements This Page (optional) ▶	1101.99
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MATTHEW 25 NETWORK

A.	Full Name (Last, First, Middle Initial) Abigail Heimach	Transaction ID: SB21B.5759 Date of Disbursement 07 / 30 / 2008
	Mailing Address 7253 Ponderosa Pines Place	Amount of Each Disbursement this Period 1451.10
	City Indianapolis State IN Zip Code 46239	
	Purpose of Disbursement Computer	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) National Women's Party	Transaction ID: SB21B.5692 Date of Disbursement 07 / 09 / 2008
	Mailing Address 144 Consitution Avenue, NE	Amount of Each Disbursement this Period 3250.00
	City Washington State DC Zip Code 20002	
	Purpose of Disbursement Catering	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Network Lobby	Transaction ID: SB21B.5687 Date of Disbursement 07 / 07 / 2008
	Mailing Address 25 E Street, NW	Amount of Each Disbursement this Period 1875.00
	City Washington State DC Zip Code 20001	
	Purpose of Disbursement Office Rent	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	6576.10
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MATTHEW 25 NETWORK

<p>A. Full Name (Last, First, Middle Initial) Network Lobby</p> <p>Mailing Address 25 E Street, NW</p> <p>City Washington State DC Zip Code 20001</p> <p>Purpose of Disbursement Office Rent</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.5814</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="01"/> / <input type="text" value="20"/> <input type="text" value="08"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1100.00"/></p>
<p>B. Full Name (Last, First, Middle Initial) Nix & Associates</p> <p>Mailing Address 7219 Manchester Rd</p> <p>City St. Louis State MO Zip Code 63143</p> <p>Purpose of Disbursement Lodging</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.5700</p> <p>Date of Disbursement</p> <p><input type="text" value="07"/> <input type="text" value="09"/> / <input type="text" value="20"/> <input type="text" value="08"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="225.00"/></p>
<p>C. Full Name (Last, First, Middle Initial) Nix & Associates</p> <p>Mailing Address 7219 Manchester Rd</p> <p>City St. Louis State MO Zip Code 63143</p> <p>Purpose of Disbursement Lodging</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.5702</p> <p>Date of Disbursement</p> <p><input type="text" value="07"/> <input type="text" value="09"/> / <input type="text" value="20"/> <input type="text" value="08"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="225.00"/></p>

SUBTOTAL of Disbursements This Page (optional) ▶

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MATTHEW 25 NETWORK

A.	Full Name (Last, First, Middle Initial) Northwest Airlines Mailing Address 2700 Lone Oak Pkwy City Eagan State MN Zip Code 55121 Purpose of Disbursement Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.5696 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 9 / 2 0 0 8 Amount of Each Disbursement this Period 269.00 Category/Type
B.	Full Name (Last, First, Middle Initial) Poste Restaurant Mailing Address 555 8th Street, NW City Washington State DC Zip Code 20004 Purpose of Disbursement Food Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.5752 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 3 / 2 0 0 8 Amount of Each Disbursement this Period 220.33 Category/Type
C.	Full Name (Last, First, Middle Initial) Priceline.com Mailing Address 800 Connecticut Ave City Norwalk State CT Zip Code 06854 Purpose of Disbursement Lodging Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.5741 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 1 / 2 0 0 8 Amount of Each Disbursement this Period 98.16 Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶

587.49

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MATTHEW 25 NETWORK

A.	Full Name (Last, First, Middle Initial) Priceline.com	Transaction ID: SB21B.5830 Date of Disbursement
	Mailing Address 800 Connecticut Ave	<input type="text" value="09"/> / <input type="text" value="04"/> / <input type="text" value="2008"/>
	City Norwalk State CT Zip Code 06854	Amount of Each Disbursement this Period
	Purpose of Disbursement Lodging	<input type="text" value="57.22"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Priceline.com	Transaction ID: SB21B.5833 Date of Disbursement
	Mailing Address 800 Connecticut Ave	<input type="text" value="09"/> / <input type="text" value="08"/> / <input type="text" value="2008"/>
	City Norwalk State CT Zip Code 06854	Amount of Each Disbursement this Period
	Purpose of Disbursement Lodging	<input type="text" value="104.89"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Priceline.com	Transaction ID: SB21B.5857 Date of Disbursement
	Mailing Address 800 Connecticut Ave	<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
	City Norwalk State CT Zip Code 06854	Amount of Each Disbursement this Period
	Purpose of Disbursement Lodging	<input type="text" value="93.59"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="255.70"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MATTHEW 25 NETWORK

A.	Full Name (Last, First, Middle Initial) Rise-Up International	Transaction ID: SB21B.5840 Date of Disbursement 09 / 15 / 2008
	Mailing Address 869 Tin Pan Alley	Amount of Each Disbursement this Period 675.00
	City Bend State OR Zip Code 97701	
	Purpose of Disbursement T-Shirt Design Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Sandler, Reiff & Young, PC	Transaction ID: SB21B.5842 Date of Disbursement 09 / 15 / 2008
	Mailing Address 300 M Street, SE Suite 1102	Amount of Each Disbursement this Period 1000.00
	City Washington State DC Zip Code 20003	
	Purpose of Disbursement Legal Services Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Eric Sapp	Transaction ID: SB21B.5845 Date of Disbursement 09 / 22 / 2008
	Mailing Address 1603 Kirby Rd	Amount of Each Disbursement this Period 759.55
	City McLean State VA Zip Code 22101	
	Purpose of Disbursement Ad Production Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	2434.55
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MATTHEW 25 NETWORK

A.	Full Name (Last, First, Middle Initial) Schneider's Liquor Mailing Address 300 Massachusetts Ave., NE City Washington State DC Zip Code 20002 Purpose of Disbursement Beverages Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.5726 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 7 / 2 0 0 8	Amount of Each Disbursement this Period 862.71
B.	Full Name (Last, First, Middle Initial) Sheraton Philadelphia Mailing Address 36th & Chestnut Streets City Philadelphia State PA Zip Code 19104 Purpose of Disbursement Lodging Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.5715 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 5 / 2 0 0 8	Amount of Each Disbursement this Period 385.32
C.	Full Name (Last, First, Middle Initial) Sheraton Philadelphia Mailing Address 36th & Chestnut Streets City Philadelphia State PA Zip Code 19104 Purpose of Disbursement Lodging Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.5717 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 5 / 2 0 0 8	Amount of Each Disbursement this Period 385.32

SUBTOTAL of Disbursements This Page (optional) ▶

1633.35

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MATTHEW 25 NETWORK

A.	Full Name (Last, First, Middle Initial) Staples	Transaction ID: SB21B.5698 Date of Disbursement 07 / 09 / 2008
	Mailing Address 1250 H Street, NW	Amount of Each Disbursement this Period 250.53
	City Washington State DC Zip Code 20005	
	Purpose of Disbursement Office Supplies	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Sharee Taylor	Transaction ID: SB21B.5734 Date of Disbursement 07 / 21 / 2008
	Mailing Address 3536 Park Place, NW	Amount of Each Disbursement this Period 207.31
	City Washington State DC Zip Code 20010	
	Purpose of Disbursement Office Supplies	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Sharee Taylor	Transaction ID: SB21B.5747 Date of Disbursement 07 / 23 / 2008
	Mailing Address 3536 Park Place, NW	Amount of Each Disbursement this Period 3000.00
	City Washington State DC Zip Code 20010	
	Purpose of Disbursement Strategic Consulting	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	3457.84
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MATTHEW 25 NETWORK

A.	Full Name (Last, First, Middle Initial) Sharee Taylor <hr/> Mailing Address 3536 Park Place, NW <hr/> City Washington State DC Zip Code 20010 <hr/> Purpose of Disbursement Strategic Consulting Candidate Name Category/Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB21B.5764 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 3300.00
B.	Full Name (Last, First, Middle Initial) Sharee Taylor <hr/> Mailing Address 3536 Park Place, NW <hr/> City Washington State DC Zip Code 20010 <hr/> Purpose of Disbursement Strategic Consulting Candidate Name Category/Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB21B.5789 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 2 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 4000.00
C.	Full Name (Last, First, Middle Initial) United Airlines <hr/> Mailing Address 77 W Wacker Drive <hr/> City Chicago State IL Zip Code 60601 <hr/> Purpose of Disbursement Travel Candidate Name Category/Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB21B.5775 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 2 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 798.49

SUBTOTAL of Disbursements This Page (optional)	8098.49
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MATTHEW 25 NETWORK

A.	Full Name (Last, First, Middle Initial) United Airlines <hr/> Mailing Address 77 W Wacker Drive <hr/> City Chicago State IL Zip Code 60601 <hr/> Purpose of Disbursement Travel Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.5829 Date of Disbursement 09 / 03 / 2008 <hr/> Amount of Each Disbursement this Period 59.00
B.	Full Name (Last, First, Middle Initial) United Airlines <hr/> Mailing Address 77 W Wacker Drive <hr/> City Chicago State IL Zip Code 60601 <hr/> Purpose of Disbursement Travel Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.5852 Date of Disbursement 09 / 25 / 2008 <hr/> Amount of Each Disbursement this Period 438.01
C.	Full Name (Last, First, Middle Initial) US Airways <hr/> Mailing Address 400 E. Sky Harbor Blvd. <hr/> City Phoenix State AZ Zip Code 85034 <hr/> Purpose of Disbursement Travel Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.5790 Date of Disbursement 08 / 22 / 2008 <hr/> Amount of Each Disbursement this Period 482.00

SUBTOTAL of Disbursements This Page (optional) ▶	979.01
TOTAL This Period (last page this line number only) ▶	[Empty Box]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MATTHEW 25 NETWORK

A.	Full Name (Last, First, Middle Initial) US Airways	Transaction ID: SB21B.5797 Date of Disbursement 08 / 25 / 2008
	Mailing Address 400 E. Sky Harbor Blvd.	Amount of Each Disbursement this Period 17.00
	City Phoenix State AZ Zip Code 85034	
	Purpose of Disbursement Travel	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) MARA VANDERSLICE	Transaction ID: SB21B.5682 Date of Disbursement 07 / 01 / 2008
	Mailing Address 25 E STREET, NW SUITE 200	Amount of Each Disbursement this Period 4000.00
	City WASHINGTON State DC Zip Code 20001	
	Purpose of Disbursement Strategic Consulting	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) MARA VANDERSLICE	Transaction ID: SB21B.5738 Date of Disbursement 07 / 21 / 2008
	Mailing Address 25 E STREET, NW SUITE 200	Amount of Each Disbursement this Period 3000.00
	City WASHINGTON State DC Zip Code 20001	
	Purpose of Disbursement Strategic Consulting	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	7017.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
MATTHEW 25 NETWORK

A.	Full Name (Last, First, Middle Initial) MARA VANDERSLICE <hr/> Mailing Address 25 E STREET, NW SUITE 200 <hr/> City WASHINGTON State DC Zip Code 20001 <hr/> Purpose of Disbursement Strategic Consulting Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.5760 Date of Disbursement 07 / 30 / 2008 <hr/> Amount of Each Disbursement this Period 1500.00
B.	Full Name (Last, First, Middle Initial) MARA VANDERSLICE <hr/> Mailing Address 25 E STREET, NW SUITE 200 <hr/> City WASHINGTON State DC Zip Code 20001 <hr/> Purpose of Disbursement Strategic Consulting Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.5765 Date of Disbursement 08 / 04 / 2008 <hr/> Amount of Each Disbursement this Period 4000.00
C.	Full Name (Last, First, Middle Initial) MARA VANDERSLICE <hr/> Mailing Address 25 E STREET, NW SUITE 200 <hr/> City WASHINGTON State DC Zip Code 20001 <hr/> Purpose of Disbursement Strategic Consulting Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.5777 Date of Disbursement 08 / 18 / 2008 <hr/> Amount of Each Disbursement this Period 3000.00

SUBTOTAL of Disbursements This Page (optional) ▶

8500.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MATTHEW 25 NETWORK

A.	Full Name (Last, First, Middle Initial) MARA VANDERSLICE	Transaction ID: SB21B.5817
	Mailing Address 25 E STREET, NW SUITE 200	Date of Disbursement MM / DD / YYYY 09 / 01 / 2008
	City WASHINGTON State DC Zip Code 20001	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Strategic Consulting	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) MARA VANDERSLICE	Transaction ID: SB21B.5839
	Mailing Address 25 E STREET, NW SUITE 200	Date of Disbursement MM / DD / YYYY 09 / 15 / 2008
	City WASHINGTON State DC Zip Code 20001	Amount of Each Disbursement this Period 4000.00
	Purpose of Disbursement Strategic Consulting	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Verizon	Transaction ID: SB21B.5853
	Mailing Address 140 West Street	Date of Disbursement MM / DD / YYYY 09 / 25 / 2008
	City New York State NY Zip Code 10007	Amount of Each Disbursement this Period 378.50
	Purpose of Disbursement Phones	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	5378.50
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MATTHEW 25 NETWORK

A.	Full Name (Last, First, Middle Initial) WACHOVIA	Transaction ID: SB21B.5782
	Mailing Address 444 NORTH CAPITOL STREET, NW	Date of Disbursement MM / DD / YYYY 08 / 20 / 2008
	City WASHINGTON State DC Zip Code 20001	Amount of Each Disbursement this Period 105.00
	Purpose of Disbursement Bank Charges Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) WACHOVIA	Transaction ID: SB21B.5786
	Mailing Address 444 NORTH CAPITOL STREET, NW	Date of Disbursement MM / DD / YYYY 08 / 21 / 2008
	City WASHINGTON State DC Zip Code 20001	Amount of Each Disbursement this Period 35.00
	Purpose of Disbursement Bank Charges Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) WACHOVIA	Transaction ID: SB21B.5836
	Mailing Address 444 NORTH CAPITOL STREET, NW	Date of Disbursement MM / DD / YYYY 09 / 10 / 2008
	City WASHINGTON State DC Zip Code 20001	Amount of Each Disbursement this Period 27.80
	Purpose of Disbursement Bank Charges Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	167.80
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE 48 / 54

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
MATTHEW 25 NETWORK

A. Full Name (Last, First, Middle Initial) Yahoo Search Mailing Address 701 First Avenue City Sunnyvale State CA Zip Code 94089 Purpose of Disbursement Online Marketing Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.5834 Date of Disbursement 09 / 08 / 2008
	Amount of Each Disbursement this Period 100.00
B. Full Name (Last, First, Middle Initial) Yahoo Search Mailing Address 701 First Avenue City Sunnyvale State CA Zip Code 94089 Purpose of Disbursement Online Marketing Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.5855 Date of Disbursement 09 / 25 / 2008
	Amount of Each Disbursement this Period 100.00

SUBTOTAL of Disbursements This Page (optional) ►

200.00

TOTAL This Period (last page this line number only) ►

61184.49

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
MATTHEW 25 NETWORK

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Suzette Caldwell			Nature of Debt (Purpose): Newspaper Advertisement
Mailing Address PO Box 130876			
City Spring	State TX	ZIP Code 77393	

Outstanding Balance Beginning This Period		Transaction ID: SD10.4515	
4931.64			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	4931.64	

1) SUBTOTALS This Period This Page (optional).....	▶	4931.64
2) TOTALS This Period (last page this line number only).....	▶	4931.64
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	4931.64

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) MATTHEW 25 NETWORK	FEC IDENTIFICATION NUMBER C C00449801
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Buying Time, LLC

Date
M M / D D / Y Y Y Y
0 8 / 1 5 / 2 0 0 8

Mailing Address
2715 M Street, NW

Amount
4959.75

City State Zip Code
Washington DC 20007

Transaction ID: SE.4521

Purpose of Expenditure
TV Ad - Disseminated
8/16/08

Category/
Type

Office Sought: House State: DC
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
BARACK OBAMA

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 39817.14

Disbursement For: Primary General
 Other (specify) : _____
2008

Full Name (Last, First, Middle, Initial) of Payee
Eleison Group

Date
M M / D D / Y Y Y Y
0 7 / 2 3 / 2 0 0 8

Mailing Address
1665 North Fort Meyer; Suite 700

Amount
5000.00

City State Zip Code
Arlington VA 22209

Transaction ID: SE.4523

Purpose of Expenditure
Radio Ad Production

Category/
Type

Office Sought: House State: DC
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
BARACK OBAMA

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 25158.39

Disbursement For: Primary General
 Other (specify) : _____
2008

(a) SUBTOTAL of Itemized Independent Expenditures	9959.75
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

MARA VANDERSLICE
Signature

Date M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 0 8

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) MATTHEW 25 NETWORK	FEC IDENTIFICATION NUMBER C C00449801
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
National Catholic Reporter

Date
MM / DD / YYYY
08 / 15 / 2008

Mailing Address
115 E. Armour Blvd.

Amount
2265.60

City State Zip Code
Kansas City MO 64111

Transaction ID: SE.4527

Purpose of Expenditure Category/Type
Newspaper Ad

Office Sought: House State: DE
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
BARACK OBAMA

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
2265.60

Disbursement For: Primary General
 Other (specify) : _____
2008

Full Name (Last, First, Middle, Initial) of Payee
Ohio Christian Radio

Date
MM / DD / YYYY
09 / 23 / 2008

Mailing Address
PO Box 2396

Amount
505.60

City State Zip Code
Sandusky OH 44870

Transaction ID: SE.5846

Purpose of Expenditure Category/Type
Radio Ad

Office Sought: House State: DC
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
BARACK OBAMA

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
40322.74

Disbursement For: Primary General
 Other (specify) : _____
2008

(a) SUBTOTAL of Itemized Independent Expenditures	2771.20
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

MARA VANDERSLICE
Signature

Date MM / DD / YYYY
10 / 14 / 2008

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) MATTHEW 25 NETWORK	FEC IDENTIFICATION NUMBER ▼ C C00449801
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Ohio Christian Radio

Date
M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 0 8

Mailing Address
PO Box 2396

Amount
2760.00

City State Zip Code
Sandusky OH 44870

Transaction ID: SE.5850
Office Sought: House State: DC
 Senate District: _____
 Presidential

Purpose of Expenditure Category/Type
Radio Ad

Check One: Support Oppose

Name of Federal Candidate supported or Opposed by expenditure:
BARACK OBAMA

Disbursement For: Primary General
 Other (specify) : _____
2008

Calendar Year-To-Date Per Election for Office Sought
43082.74

Full Name (Last, First, Middle, Initial) of Payee
pTV Media

Date
M M / D D / Y Y Y Y
0 8 / 1 5 / 2 0 0 8

Mailing Address
P.O. Box 65273

Amount
6988.00

City State Zip Code
Washington DC 20035

Transaction ID: SE.4519
Office Sought: House State: DC
 Senate District: _____
 Presidential

Purpose of Expenditure Category/Type
TV Ad Production - Disseminated 8/18/08

Check One: Support Oppose

Name of Federal Candidate supported or Opposed by expenditure:
BARACK OBAMA

Disbursement For: Primary General
 Other (specify) : _____
2008

Calendar Year-To-Date Per Election for Office Sought
34857.39

(a) SUBTOTAL of Itemized Independent Expenditures	9748.00
(b) SUBTOTAL of Unitemized Independent Expenditures	_____
(c) TOTAL Independent Expenditures	_____

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

MARA VANDERSLICE
Signature

Date M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 0 8

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) MATTHEW 25 NETWORK	FEC IDENTIFICATION NUMBER C C00449801
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Alfred M. Rotondaro

Mailing Address
5904 Ashby Manor

City Alexandria	State VA	Zip Code 22310
--------------------	-------------	-------------------

Purpose of Expenditure Newspaper Advertisement	Category/ Type
---	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
BARACK OBAMA

Calendar Year-To-Date Per Election for Office Sought 14665.89

Date
M M / D D / Y Y Y Y
0 7 / 1 4 / 2 0 0 8

Amount
1186.67

Transaction ID: SE.5708

Office Sought: House State: DC
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2008

Full Name (Last, First, Middle, Initial) of Payee
Eric Sapp

Mailing Address
1603 Kirby Rd

City McLean	State VA	Zip Code 22101
----------------	-------------	-------------------

Purpose of Expenditure Radio Ad Production	Category/ Type
---	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
BARACK OBAMA

Calendar Year-To-Date Per Election for Office Sought 17517.25

Date
M M / D D / Y Y Y Y
0 7 / 2 2 / 2 0 0 8

Amount
2851.36

Transaction ID: SE.5744

Office Sought: House State: DC
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2008

(a) SUBTOTAL of Itemized Independent Expenditures	4038.03
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

MARA VANDERSLICE
Signature

Date M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 0 8

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) MATTHEW 25 NETWORK	FEC IDENTIFICATION NUMBER C C00449801
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Eric Sapp

Mailing Address
1603 Kirby Rd

City McLean	State VA	Zip Code 22101
----------------	-------------	-------------------

Purpose of Expenditure Radio Ad Production	Category/ Type
---	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
BARACK OBAMA

Calendar Year-To-Date Per Election for Office Sought	20158.39
---	----------

Date
M M / D D / Y Y Y Y
07 / 22 / 2008

Amount
2641.14

Transaction ID: SE.5746

Office Sought: House State: DC
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2008

Full Name (Last, First, Middle, Initial) of Payee
Eric Sapp

Mailing Address
1603 Kirby Rd

City McLean	State VA	Zip Code 22101
----------------	-------------	-------------------

Purpose of Expenditure Radio Ad Production	Category/ Type
---	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
BARACK OBAMA

Calendar Year-To-Date Per Election for Office Sought	27869.39
---	----------

Date
M M / D D / Y Y Y Y
08 / 02 / 2008

Amount
2711.00

Transaction ID: SE.5763

Office Sought: House State: DC
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2008

(a) SUBTOTAL of Itemized Independent Expenditures	5352.14
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	31869.12

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

MARA VANDERSLICE
Signature

Date M M / D D / Y Y Y Y
10 / 14 / 2008